

	(Form updated to reflect FY 2004 fees effective 10/1/0						
FEE TRANSMITTAL	Con				Com	plete if Known	
FEE IKANSMITTAL		Application Number			er	09/921263	
for FY 2004		Filing Date				August 2, 2001	
Effective 10/01/2003, Patent fees are subject to annual revision.		First Named Inventor			ntor	Frederic Garcon	
Ellective 10/01/2003, Fateric lees are subject to arrival revision.		Examiner Name				R. Kallis	
Applicant claims small entity status. See 37 CFR 1.27			Art Unit			1638	
TOTAL AMOUNT OF PAYMENT (\$) 1,720.00	Attorney Docket No.			cket No	0.	05500-00101-US	
METHOD OF PAYMENT (check all that apply)	FEE CALCU				CALCU	LATION (continued)	
X Check Credit Money Other None  Deposit Account:	3. ADDITIONAL FEES						
Deposit		Entity Small Entity					
Account Number 03-2775	Fee Code	Fee (\$)	Fee Code	Fee (\$)		Fee Description	Fee Paid
Deposit Account Connolly Bove Lodge & Hutz LLP	1051	130	2051	65	Surcharge	e - late filing fee or oath	
Name The Director is authorized to: (check all that apply)	1052	50	2052	25	Surcharge sheet.	e - late provisional filing fee or cover	
Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130		sh specification	
X Charge any additional fee(s) during the pendency of this	1812	2,520	1812	2,520	For filing a	request for ex parte reexamination	
application	1804	920*	1804	920*	Requestin Examiner	g publication of SIR prior to	
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		1,840*	1805	1,840*	Requestin	g publication of SIR after	
FEE CALCULATION		110	2251	55	Examiner Extension	for reply within first month	
1. BASIC FILING FEE	1251 1252	420	2252	210		for reply within second month	
Large Entity Small Entity	1253	950	2253	475	Extension	for reply within third month	950.00
Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1254	1,480	2254	740	Extension	for reply within fourth month	
Code (\$)   Code (\$) 1001 770   2001 385 Utility filing fee	1255	2,010	2255	1,005	Extension	for reply within fifth month	
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of A	• •	
1003 530 2003 265 Plant filing fee	1402	330	2402	165	Filing a bri	ief in support of an appeal	
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request fo	or oral hearing	
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to	institute a public use proceeding	
CURTOTAL (4) (C)	1452	110	2452	55	Petition to	revive – unavoidable	
SUBTOTAL (1) (\$) 0.00	1453	1,330	2453	665	Petition to	revive - unintentional	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,330	2501	665	Utility issu	e fee (or reissue)	
Extra Fee from Claims below Fee Paid	1502	480	2502	240	Design iss	ue fee	
Total Claims** = x	1503	640	2503	320	Plant issue	e fee	
Independent	1460	130	1460	130	Petitions to	o the Commissioner	
Claims	1807	50	1807	50		g fee under 37 CFR 1.17(q)	
Large Entity Small Entity	1806	180	1806	180	Submissio	on of Information Disclosure Stmt	
Fee Fee Fee Fee Pescription	8021	40	8021	40		each patent assignment per	
Code (\$) Code (\$)	0021	70				imes number of properties) bmission after final rejection	
1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3	1809	770	2809	385	(37 CFR 1		L
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385		additional invention to be (37CFR 1.129(b))	
1204 86 2204 43 ** Reissue independent claims	1801 770		2801	385		or Continued Examination (RCE)	770.00
over original patent 1205 18 2205 9 ** Reissue claims in excess of 20		900	1802	900		or expedited examination n application	
and over original patent	Other	fee (spe	cify)				
SUBTOTAL (2) (\$) 0.00	*Redu	Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 1,720.00					
**or number previously paid, if greater; For Reissues, see above							

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown

Registration No.

Dated: December 3, 2003

Name (Print/Type) Liza D. Hohenschutz

SUBMITTED BY

Signature

Signature

Mammy L. Hamm

33,712

(Complete (if applicable))

Date

Telephone (302) 658-9141

December 3, 2003